

Please type a plus sign (+) inside this box: ➔ +

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing  
OR  
 Declaration Submitted after Initial Filing (surcharge [37 CFR 1.16(e)] required)

Attorney Docket Number	38187-2785
First Named Inventor	Alden
COMPLETE IF KNOWN	
Application Number	10/541,123
Filing Date	June 30, 2005
Group Art Unit	Not assigned
Examiner Name	Not assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR LOADING PENETRATING MEMBERS**

*(Title of the Invention)*

the specification of which:  
 is attached hereto

OR

was filed on (MM/DD/YYYY) December 31, 2003 as United States Application Number or PCT International

Application Number PCT/US2003/041747 and was amended on (MM/DD/YYYY) N/A (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
PCT/US03/041747	US	Dec. 31, 2003	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

BEST AVAILABLE COPY

Please Type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

BEST AVAILABLE COPY

## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, Insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number  →  Place Customer Number Bar Code Label here

OR

Registered practitioner(s) name/registration number listed below

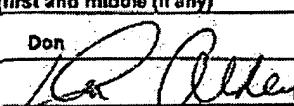
Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		25213	OR	<input type="checkbox"/> Correspondence address below
--	--	-------	----	---

Name					
Address					
City	State	CA	ZIP		
Country	Telephone		Fax		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned Inventor							
Given Name (first and middle if any)				Family Name or Surname				
Don				ALDEN				
Inventor's Signature						Date	28 MAR 06	
Residence: City	Sunnyvale	State	CA	Country	USA	Citizenship	US	
Post Office Address	1312 Nelson Way							
Post Office Address								
City	Sunnyvale	State	CA	ZIP	94087	Country	USA	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>3</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:								

(Page 2)

Please Type a plus sign (+) inside this box → 

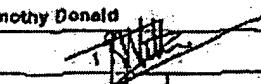
PTO/SB/02A (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

BEST AVAILABLE COPY

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Timothy Donald				BARROW-WILLIAMS			
Inventor's Signature					Date	29 MARCH 06	
Residence: City	St Albans	State		Country	UK	Citizenship	UK
Post Office Address	200 London Road						
Post Office Address							
City	St Albans	State		ZIP	AL1 1PL	Country	UK
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))				Family Name or Surname			
Charlie Michael				DEAN			
Inventor's Signature					Date		
City	New York	State	NY	Country	USA	Citizenship	US
Post Office Address	8 Peter Cooper Rd. Apt 14F						
Post Office Address							
City	New York	State	NY	ZIP	10010	Country	USA
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))				Family Name or Surname			
Martin Lawrence				HUGHES			
Inventor's Signature					Date	29 Mar 06	
City	Milton Keynes	State		Country	UK	Citizenship	UK
Post Office Address	9 Crow Lane						
Post Office Address	Lower End, Wavendon						
City	Milton Keynes	State		ZIP	MK17 5AR	Country	UK

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Please Type a plus sign (+) inside this box →

PTO/SB/02A (3-87)

Approved for use through 03/31/98, OMB 0651-0092

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>3</u>				
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Timothy Donald				BARROW-WILLIAMS				
Inventor's Signature					Date			
Residence City	St Albans	State		Country	UK	Citizenship	UK	
Post Office Address	200 London Road							
Post Office Address								
City	St Albans	State		ZIP	AL1 1PL	Country	UK	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname				
Charlie Michael				DEAN				
Inventor's Signature	<i>Charles Dean</i>				Date	03/28/06		
City	New York	State	NY	Country	USA	Citizenship	US	
Post Office Address	8 Peter Cooper Rd. Apt 14P							
Post Office Address								
City	New York	State	NY	ZIP	10010	Country	USA	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname				
Marin Lawrence				HUGHES				
Inventor's Signature					Date			
City	Milton Keynes	State		Country	UK	Citizenship	UK	
Post Office Address	9 Crow Lane							
Post Office Address	Lower End, Wavendon							
City	Milton Keynes	State		ZIP	MK17 8AR	Country	UK	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Please Type a plus sign (+) inside this box → PTO/SBU/02A (3-87)  
Approved for use through 9/30/98,OMB 0651-0032Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION</b>		<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>2</u> of <u>3</u>		
--------------------	--	--	--	--

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Mark Robson		HUMPHRIES					
Inventor's Signature	<i>M.J.R. Humes</i>				Date	23/3/06	
Residence: City	Essex	State		Country	UK	Citizenship	UK
Post Office Address	Manor Mead, High Street						
Post Office Address	Great Chastorford, Nr Saffron Walden						
City	Essex	State		ZIP	CB10 1PL	Country	UK
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Douglas Ivan		JENNINGS					
Inventor's Signature	<i>Douglas Ivan</i>				Date	24-3-06	
City	Herts	State		Country	UK	Citizenship	UK
Post Office Address	73 Redwing Rise						
Post Office Address	Royston						
City	Herts	State		ZIP	SG8 7XU	Country	UK
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Thomas		NEUDECK					
Inventor's Signature	<i>Thomas Neudeck</i>				Date	23/03/06	
City	Hertford	State		Country	UK	Citizenship	UK
Post Office Address	14 Port Hill						
Post Office Address							
City	Hertford	State		ZIP	SG14 3EP	Country	UK

**Burden Hour Statement:** This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Please Type a plus sign (+) inside this box → 

PTO/SB/02A (3-07)  
Approved for use through 5/20/98, OMB 0651-0032  
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION</b>		<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>3</u> of <u>3</u>			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle, if any)		Family Name or Surname			
John Anthony		STEPHENSON			
Inventor's Signature	<i>John Stephenson</i>			Date	23-3-06
Residence: City	Cambridge	State	Country	UK	Citizenship
Post Office Address	1 March Lane				
Post Office Address	Cherry Hinton				
City	Cambridge	State	ZIP	CB1 3LG	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle, if any)		Family Name or Surname			
Inventor's Signature				Date	
City		State	Country		Citizenship
Post Office Address					
Post Office Address					
City		State	ZIP		Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle, if any)		Family Name or Surname			
Inventor's Signature				Date	
City		State	Country		Citizenship
Post Office Address					
Post Office Address					
City		State	ZIP		Country

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

BEST AVAILABLE COPY